PATENT

Attorney's Docket No. 7553

		(COMBINED DECLARATION AND POWER OF ATTORNEY				
	(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL, CONTINUATION OR CIP)						
As a bel	ow dan	ed invent	tor, I hereby declare that:				
			TYPE OF DECLARATION				
This dec	laratio	is of the	following type: (check one applicable item below)				
	<u>X</u>	origina					
		design	1				
	-	supple	menia!				
NOTE:	If the de item; ch	the declaration is for an international Application being filed as a divisional, continuation of continuation-in-part application, do not check next out; check appropriate one of last three items.					
	_	nations	al stage of PCT (under 35 U.S.C. §371)				
NOTE:	If one o	If one of the following 3 items apply, then complete and also anach ADDED FAGES FOR DIVISIONAL, CONTINUATION OR CIP.					
	_	divisio	onal				
	x_	contim					
	_	contin	uation-in-part (CIP)				
			INVENTORSHIP IDENTIFICATION				
WARNI)	NG:	If the inv	entors are each and the inventors of all the claims, an explanation of the facts, including the ownership of all the claims at the last claimed invention was made, should be submitted.				
My resi	dence,	time the post office fonly one	ventors are each not the inventors of all the claims, an explanation of the facts, including the ownership of all the claims at the				
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My resistole in the sub	rentor (i ject mai TED L cificatio (a) (b)	post office f only one tter which ACTOCO on of Whie	ventors are each not the inventors of all the claims, an explanation of the facts, including the ownership of all the claims at the last claimed invention was made, should be submitted. e address and citizenship are as stated below next to my name. I believe I am the original, first and a name is listed below) or an original, first and joint inventor (if plural names are listed below) of its claimed and for which a patent is sought on the invention entitled: TITLE OF INVENTION SPECIFICATION IDENTIFICATION th: (complete (a), (b) or (c)) is attached hereto.				
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ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information

X which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56

(also check the following items, if desired)

- and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable examiner would consider it important in deciding whether to allow the application to issue as a patent, and
 - In compliance with this duty there is attached an information disclosure statement in accordance with 37 CFR 1.98.

PRIORITY CLAIM (35 U.S.C. § 119)

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

(complete (d) or (e))

- (d) x no such applications have been filed.
- (c) _ such applications have been filed as follows.

NOTE: Where item (c) is entered above and the International Application which designated the U.S. itself claimed priority check item (e), enter the details below and make the priority claim.

A. PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. § 119

COUNTRY (OR INDICATE IF PCT)	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119	
PCT	PCT/SE02/01805	3 October 2002	X YES	NO
SE	0103294-4	3 October 2001	x YES	МО
			_ YES	NO
			YES	NO
			_ YES	МО

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ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

NOTE: If the application filed more than 12 months from the filing date of this application is a PCT filing forming the basis for this application entering the United States as (1) the national stage, or (2) a continuation, divisional, or continuation-in-part, then also complete ADDED PAGES TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR CIP APPLICATION for benefit of the prior U.S. or PCT application(s) under 35 U.S.C. § 120.

POWER OF ATTORNEY

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Maurice E. Gauthier - 20,798	Matthew E. Connors	- 33,298
I. Stephen Samuels, - 20,919	Arlene J. Powers	- 35,985
William E. Hilton - 35,192	Patrick J. O'Shea	- 35,305
Richard L. Stevens, Jr 44,357	Peter S. Stecher	- 47,259

(check the following item, if applicable)

Attached as part of this declaration and power of attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

SEND CORRESPONDENCE TO

DIRECT TELEPHONE CALLS TO: (Name and telephone number)

Matthew E. Connors, Esq. Gauthier & Connors LLP 225 Franklin Street Suize 3300 Boston, Massachusetts 02110

Matthew E. Connors (617) 426-9180 Extension 112

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

NOTE: Carefully indicate the family (or last) name as it should appear on the filing receipt and all other documents.

Full name of sole or first inventor Andersson <u>Ulnka</u> FAMILY (OR LAST NAME) (MIDDLE INITIAL OR NAME) (GIVEN NAME) Inventor's signature Quq 19, 2004 Country of Citizenship Residence Post Office Address (same as above) Full name of second joint inventor, if any Radstrom (IDDLE INITIAL OR NAME) FAMILY (OR LAST NAME) (GIVEN NAME) Inventor's signature 449. 17, 2004 Country of Citizenship Residence Post Office Address (same as above) Full name of third joint inventor, if any (MIDDLE INITIAL OR NAME) FAMILY (OR LAST NAME) (GIVEN NAME) Inventor's signature

Country of Citizenship

(same as above)

Date _

Residence

Post Office Address

CHECK PROPER BOX(ES) FOR ANY OF THE FOLLOWING ADDED PAGE(S) WHICH FORM A PART OF THIS DECLARATION

-	Signature for third and subsequent joint inventors. Number of pages added

_	Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. Number of pages added

	Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47. Number of pages added
	*单套
-	Added page for signature by one joint inventor on behalf of deceased inventor(s) where legal representative cannot be appointed in time (37 CFR 1.47).

-	Added pages to combined declaration and power of attorney for divisional, continuation, or continuation-in-part (C-l-P) application.
	Number of pages added
	े के क
•	Authorization of attorney(s) to accept and follow instructions from representative.
	* * *
	(If no further pages form a part of this Declaration, then end this Declaration with this page and check the following item.)

This declaration ends with this page.